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PTO/SB/21 (04-04)

TRANSMITTAL FORM

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Total Number of Pages in This Submission

Application Number	10/660,366
Filing Date	September 11, 2003
First Named Inventor	Lurie, Keith
Art Unit	3743
Examiner Name	Andrea M. Ragonese
Attorney Docket Number	016354-005400US

ENCLOSURES (Check all that apply)

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Fee Attached
<input checked="" type="checkbox"/> Response to Restriction Requirement
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input checked="" type="checkbox"/> Extension of Time Request
<input type="checkbox"/> Express Abandonment Request
<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Response to Missing Parts/Incomplete Application
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition
<input type="checkbox"/> Petition to Convert to a Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation
Change of Correspondence Address
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Request for Refund
<input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Technology Center (TC)
<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
Return Postcard |
|--|---|--|

Remarks

The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Townsend and Townsend and Crew LLP Darin J. Gibby	Reg. No. 38,464
Signature		
Date	August 16, 2004	

CERTIFICATE OF TRANSMISSION/MAILING

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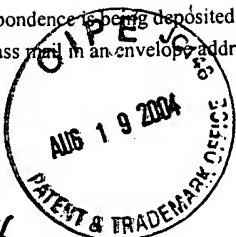
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On Aug 16, 2004

TOWNSEND and TOWNSEND and CREW LLP

By: Goumi Laron



PATENT
Attorney Docket No. 016354-005400US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Keith G. Lurie

Application No.: 10/660,366

Filed: September 11, 2003

For: BAG-VALVE RESUSCITATION FOR
TREATMENT OF HYPOTENSION, HEAD
TRAUMA, AND CARDIAC ARREST

Art Unit: 3743

Examiner: Andrea M. Ragonese

Confirmation No. 5478

RESPONSE TO RESTRICTION
REQUIREMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the restriction requirement mailed July 1, 2004, Applicants hereby elect the claims of Group I, i.e., claims 1-19 and 35, and Species I-A, i.e., claims 1-17. Accordingly, please cancel claims 20-34, without prejudice. The election to the restriction requirement is made without traverse. The election of Species 1-A is made with traverse. Each of claims 1-19 and 35 relate to enhancing venous return to the heart by extracting respiratory gases from the airway to create an intrathoracic vacuum.

Respectfully submitted,

Darin J. Gibby
Reg. No. 38,464

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